Fill ir	n this information to identify your case:					lirected in this form and	in Form
Debt	or 1 James Harold Cole		12	2A-1Sup	p:		
Debt (Spou	or 2 se, if filing)			■ 1. The	ere is no pres	umption of abuse	
Unite	ed States Bankruptcy Court for the: Eastern District of	Tennessee		ар	plies will be r	o determine if a presul nade under <i>Chapter 7</i> icial Form 122A-2).	
Case (if kno	e number			_	,	,	annua of
(,					does not apply now bo service but it could ap	
				☐ Che	ck if this is a	n amended filing	
Off	icial Form 122A - 1						
Ch	apter 7 Statement of Your Cur	rent Mon	thly Inc	ome			12/1
attach case i qualif Part	•	rhich the addition m a presumption otion from Presum	al information a of abuse becau	applies. C ise you d	on the top of a not have pri	ny additional pages, wri narily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check one or	nly.					
	Not married. Fill out Column A, lines 2-11.						
	Married and your spouse is filing with you. Fill ou			2-11.			
	☐ Married and your spouse is NOT filing with you.	-			15.5	2.44	
	☐ Living in the same household and are not lega	-					
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are living apart for reasons that do not include evading	egally separated	under nonbar	nkruptcy	aw that appli	es or that you and you	
10 the	Il in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total ouses own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throult. Do not include	ugh Augus de any inc	st 31. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
				Column Debtor		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissio	ns (before all	\$	0.00	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from a	a spouse if	\$	424.00	\$	
	All amounts from any source which are regularly pa of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	. Include regular d, your dependen rouse only if Colu	contributions its, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession,	or farm Debt	or 1				
	Gross receipts (before all deductions)	\$ 0.00	.0				
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from a business, profession, or far	m \$ 0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property						
		Debt	or 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00	0	•	0.00	•	
	Net monthly income from rental or other real property	\$0.00	Copy here ->		0.00	\$	
7	Interest dividends and royalties			\$	0.00	Ψ	

7. Interest, dividends, and royalties

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Page 2 of 3 Main Document **James Harold Cole** Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead. list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. Family's First 344.00 \$ 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 768.00 \$ \$ 768.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 768.00 Multiply by 12 (the number of months in a year) x 12 9.216.00 12b. The result is your annual income for this part of the form 12h. 13. Calculate the median family income that applies to you. Follow these steps: TN Fill in the state in which you live. Fill in the number of people in your household. 78.715.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

James Harold Cole

Signature of Debtor 1

Debtor 1	James Harold Cole	Case number (if known)	
Dat	December 29, 2022		
	MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		